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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Karl First name A Middle name Kirschenman Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9242 | |

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Case number (if known)

Debtor 1 Karl A Kirschenman

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 608 Prairie Parkway Hampshire, IL 60140 | If Debtor 2 lives at a different address: | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Kane | Causti | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| bankruptcy | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Case number (if known) Debtor 1 Karl A Kirschenman

| ⊃ar | t 2: Tell the Court About | Your E | Bankruptcy Ca | ise | | | | | |
|------------|---|---|---------------|----------------------------------|--|--------------|---|---|---|
| 7. | The chapter of the Bankruptcy Code you are | | | | on of each, see <i>No</i> of page 1 and ch | | | 42(b) for Individuals F | Filing for Bankruptcy |
| | choosing to file under | ■ Chapter 7 | | | | | | | |
| | | | Chapter 11 | | | | | | |
| | | □ Chapter 12 | | | | | | | |
| | | | Chapter 13 | | | | | | |
| 3. | How you will pay the fee | • | about how yo | u may pay. Ty attorney is sul | ypically, if you are | paying the f | fee yourself, you ma | ay pay with cash, cas | I court for more details hier's check, or money edit card or check with |
| | | | I need to pay | the fee in in | stallments. If you | | s option, sign and at | tach the Application | for Individuals to Pay |
| | | ☐ I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B). | | | | | ess than 150% of the . If you choose this o | official poverty line that ption, you must fill out | |
| | Have you filed for | | | | | | | | |
| , . | ankruptcy within the | ■ N | | | | | | | |
| | last 8 years? | ПΥ | | | | | | | |
| | | | District | | | When | | Case number | |
| | | | District | | | When | | Case number | |
| | | | District | - | | When | | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ N | 0 | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y | es. | | | | | | |
| | | | Debtor | | | | F | Relationship to you | |
| | | | District | | | When | C | Case number, if know | n |
| | | | Debtor | | | | F | Relationship to you | |
| | | | District | | | When | (| Case number, if know | n |
| 11. | Do you rent your residence? | ■ N | o. Go to I | ine 12. | | | | | |
| | . Joingiloo . | ΠY | es. Has yo | ur landlord ob | tained an eviction | n judgment a | gainst you and do y | ou want to stay in yo | ur residence? |
| | | | | No. Go to line | e 12. | | | | |
| | | | | Yes. Fill out I bankruptcy p | | About an Evi | ction Judgment Aga | iinst You (Form 101A |) and file it with this |
| | | | | | | | | | |

| Debtor 1 | Karl A Kirschenman | Document | Page 4 of 59 Case number (if known) | |
|----------|--------------------|----------|-------------------------------------|--|
| | | | | |

| Par | Report About Any Bu | sinesses ` | You Owi | n as a Sole Propriet | or | | |
|---|--|--------------------------------------|--|--------------------------------------|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. Name and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | per, Street, City, State | e & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate box | a to describe your business: | | |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | |
| | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | |
| 13. | 3. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the your most recent balance sheet, so operations, and the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provided in the your most recent balance sheet, so operations are not provi | | | | a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure | | |
| | For a definition of small | No. | ram | not filing under Chapt | er ii. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am | filing under Chapter 1 | 1 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Dow | Depart if You Own or | Have Any | Uomond | nuo Dromortiv or Ann | Property That Needs Immediate Attention | | |
| Par 14 | Do you own or have any | | пагаги | ous Property or Any | Property That Needs Immediate Attention | | |
| 14. | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ■ No. □ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | |
| For example, do you ov perishable goods, or livestock that must be for a building that needs urgent repairs? | | | Where i | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

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Debtor 1 Karl A Kirschenman

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 | Karl A Kirschenman | Document | Page 6 of 59 | Case number (if known) |
|----------|--------------------|----------|--------------|------------------------|
|----------|--------------------|----------|--------------|------------------------|

| Par | 6: Answer These Questi | ons for R | eporting Purposes | | | | |
|---|--|---|---|--|---|---|--|
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consult individual primarily for a personal, | | | n 11 U.S.C. § 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily busine money for a business or investme | | | | |
| | | | ☐ No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you owe that are not consumer debts or business debts | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do yo are paid that funds will be available | | | is excluded and administrative expenses | |
| | administrative expenses are paid that funds will | | ■ No | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 □ 200-9 | 99 | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 |) | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | |
| 19. | How much do you estimate your assets to be worth? | \$100 , | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | \$1,000,001 - \$ \$10,000,001 - \$50,000,001 - \$100,000,001 | \$50 million \$100 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | \$100 , | 50,000 101 - \$100,000 101 - \$500,000 1001 - \$1 million | \$1,000,001 - \$ \$10,000,001 - \$50,000,001 - | \$50 million \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | |
| Part | 7: Sign Below | | | | | | |
| For | you | I have ex | amined this petition, and I declare u | under penalty of per | rjury that the informatio | n provided is true and correct. | |
| | | | chosen to file under Chapter 7, I am tates Code. I understand the relief a | | | er Chapter 7, 11,12, or 13 of title 11, eto proceed under Chapter 7. | |
| | | | rney represents me and I did not pa tt, I have obtained and read the noti | | | attorney to help me fill out this | |
| | | I request | relief in accordance with the chapte | er of title 11, United | States Code, specified | I in this petition. | |
| | | bankrupto and 3571 | | cealing property, or 50,000, or imprison | obtaining money or pro ment for up to 20 years | perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | Karl A | Kirschenman e of Debtor 1 | | Signature of Debtor 2 | | |
| Executed on March 20, 2017 Executed on MM / DD / YYYY MM / DD / YYYYY | | | | | D/YYYY | | |
| | | | | | | | |

Debtor 1 Karl A Kirschenman

Document Page 7 of 59

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joshua | D. Greene | Date | March 20, 2017 |
|-----------------|------------------------|---------------|-----------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Joshua D. | Greene | | |
| Printed name | | | |
| Springer E | Brown, LLC | | |
| Firm name | | | |
| 300 S. Cou | unty Farm Road | | |
| Suite I | | | |
| Wheaton, | IL 60187 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 630-510-0000 | Email address | www.springerbrown.com |
| 6292914 | | | |
| Barnumbar & S | tato | | |

| sc Main |
|---|
| |
| § 101(8) as "incurred by an |
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| |
| to obtain nt. |
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| |
| |
| and administrative expenses |
| |
| |
| 50,000 |
| ☐ 50,001-100,000 ☐ More than100,000 |
| an100,000 |
| 0,001 - \$1 billion |
| ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| |
| □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion |
| an \$50 billion |
| |
| s true and correct. |
| , 11,12, or 13 of title 11, under Chapter 7. |
| elp me fill out this |
| ion. |
| ud in connection with a U.S.C. §§ 152, 1341, 1519, |
| |
| |
| a (O), a (O) (O) is |

Case 17-08680 Doc 1 Filed 03/20/17 Entered 03/20/17 15:10:05 Desc Main Debtor 1 Karl A Kirschenman Document Page 9 of 59 Case number (if known) I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) represented by one If you are not represented by and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. an attorney, you do not need to file this page. Date Signature of Attorney for Debtor Joshua D. Greene Printed name Springer Brown, LLC 300 S. County Farm Road Suite I Wheaton, IL 60187

Email address

www.springerbrown.com

Number, Street, City, State & ZIP Code

Contact phone 630-510-0000

6292914 Bar number & State Case 17-08680 Doc 1 Filed 03/20/17 Entered 03/20/17 15:10:05 Desc Main Document Page 10 of 59

| N.A.A. (10) NA. (10) NASA (10) | | | ************************************** | | 1 | |
|---|--------------------------------|--------------------------|--|------------------------|---------------------------------------|--|
| Fill in this inforn | nation to identify your | case: | | | | |
| Debtor 1 | Karl A Kirschenm | an | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | Middle Me | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number (if known) | | | | | ☐ Check if this is an | |
| | | AAAAAAAA | | | amended filing | |
| | | | : | | | |
| Official Farm | - 100D | | | | | |
| Official Forn | | | | | | |
| Declarat | ion About a | ın Individual | Debtor's So | chedules | 12/15 | |
| | | | | | | |
| f two married people are filing together, both are equally responsible for supplying correct information. | | | | | | |
| You must file this | s form whenever you fi | le bankruptcy schedules | s or amended schedule | s. Making a false sta | tement, concealing property, or | |
| obtaining money | or property by fraud in | n connection with a bank | kruptcy case can result | in fines up to \$250,0 | 000, or imprisonment for up to 20 | |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | | |
| | | | | | | |
| Sign | n Below | | | | | |
| | | | | | | |
| Did you pa | y or agree to pay some | eone who is NOT an attor | rney to help you fill out | bankruptcy forms? | | |
| | | | | | | |
| ■ No | | | | | | |
| ☐ Yes. I | Name of person | | | Attach Ba | nkruptcy Petition Preparer's Notice, | |
| _ | | | | Declaration | on, and Signature (Official Form 119) | |
| | | | | | | |
| Under pena | ily of perjury Lectare | that I have read the sum | nmary and schedules fi | led with this declarat | tion and | |
| that they are | e true and correct. | | | | | |
| XXXX | V | | X | | | |
| | Kirschenman are of Debtor 1 | | Signature of | of Debtor 2 | | |
| Date | 3-17-201 | 7 | Date | | | |
| 1004 | | | | | | |

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| Debtor 1 Karl A Kirschenman | Case number (if known) |
|--|--|
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention about property that is subject to an unexpired lease. | any property of my estate that secures a debt and any personal |
| x (the () X | |
| | Signature of Debtor 2 |
| Date 3-/7-/7 Date | e |

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Page 12 of 59 (if known) Document Debtor 1 Karl A Kirschenman

| | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | |
|---|---|---|---|------------|-----------------------------------|------------------|
| 8. Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 |
| Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here: | nt received was a benef | it under | | | | |
| For you S | \$ 0.0 | 00 | | | | |
| For your spouse | \$0.0 | 00_ | | | | |
| Pension or retirement income. Do not include any a benefit under the Social Security Act. | mount received that was | s a | \$ | 0.00 | \$ | 0.00 |
| 10. Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below. | Security Act or paymen umanity, or international | ts or | \$ | 0.00 | e | 0.00 |
| • | | | *************************************** | 0.00 | \$ | 0.00 |
| T -1-1 | | | \$ | 0.00 | \$ | 0.00 |
| Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 |
| Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t | | \$ | 2,082.50 | + s | 6,953.67 | S 9,036.17 |
| art 2: Determine Whether the Means Test Applies | to You | | | | | income |
| 12. Calculate your current monthly income for the year | r. Follow these steps: | | | | | |
| 12a. Copy your total current monthly income from line | : 11 | *************************************** | Сор | y line 11 | here=> | \$9,036.17_ |
| Multiply by 12 (the number of months in a year) | | | | | | x 12 |
| 12b. The result is your annual income for this part of t | he form | | | | 12b | \$108,434.04 |
| 13. Calculate the median family income that applies to | o you. Follow these step | os: | | | | |
| Fill in the state in which you live. | IL | | | | | |
| Fill in the number of people in your household. | 2 | | | | | |
| Fill in the median family income for your state and size To find a list of applicable median income amounts, g for this form. This list may also be available at the bar | o online using the link s | | in the separ | ate instru | 13. ctions | \$65,659.00 |
| 14. How do the lines compare? | | | | | | |
| 14a. Line 12b is less than or equal to line 13. Go to Part 3. | On the top of page 1, ch | neck box | 1, There is | no presur | nption of abus | e. |
| 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2. | o of page 1, check box 2 | , The pr | esumption o | f abuse is | determined by | y Form 122A-2. |
| Part 3: Sign Below | | | | | | |
| By signing here, I declare under penalty of perju | ry that the information o | n this st | atement and | in any at | tachments is tr | rue and correct. |
| Karl A Kirochemman Signature of Debtor 1 | | | | ŕ | | |
| Date 13-17-17 | | | | | | |
| If you checked line 14a, do NOT fill out or file Fo | orm 122A-2. | | | | | |
| If you checked line 14b, fill out Form 122A-2 and | | | | | | |

Case 17-08680 Doc 1 Filed 03/20/17 Entered 03/20/17 15:10:05 Desc Main Page 13 of 59 Document Karl A Kirschenman Debtor 1 41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. .25 Conv 41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I) here=> Multiply line 41a by 0.25..... 42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies: ☐ Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Part 4: Give Details About Special Circumstances 43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment Part 5: Sign Below By signing here I deplare under penalty of perjury that the information on this statement and in any attachments is true and correct. arl A Kirschenman Signature of Debtor 1

Official Form 122A-2

03-14-17

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Document Page 14 of 59 United States Bankruptcy Court Northern District of Illinois

| In re | Karl A Kirschenman | | Case No. | | |
|----------------|---|--------------------------------|-------------------------|-------------------------------|---------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENSA | TION OF ATTO | RNEY FOR DI | EBTOR(S) | |
| е | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or i | he petition in bankrupte | y, or agreed to be paid | to me, for services rendered | or to |
| | For legal services, I have agreed to accept | | s | 1,500.00 | |
| | Prior to the filing of this statement I have received | | s | 1,500.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. \$ | S 335.00 of the filing fee has been paid. | | | | |
| 3. Т | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| i . 1 | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensat | tion with any other perso | n unless they are men | bers and associates of my la | w firm. |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of | | | | 1. A |
| 6. | In return for the above-disclosed fee, I have agreed to render | legal service for all aspe | ects of the bankruptcy | case, including: | |
| ł | a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemer c. Representation of the debtor at the meeting of creditors ar d. [Other provisions as needed] | nt of affairs and plan whi | ch may be required; | | ; |
| 7. 1 | By agreement with the debtor(s), the above-disclosed fee doe | es not include the follow | ng service: | | |
| | C | ERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any agroankruptcy, proceeding. | reement or arrangement | For payment to me for | representation of the debtor(| s) in |
| | 3/17/17 | | | | |
| \overline{D} | Pate | Joshua D. Gree | | | |
| | | Signature of Attor | | | |
| | | 300 S. County | | | |
| | | Suite I Wheaton, IL 60 | 187 | | |
| | | 630-510-0000 | Fax: 630-510-0004 | | |
| | | www.springert Name of law firm | | | |
| 1 | | | | | |

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United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|-------|--|---|----------------------|-------------------------|
| In re | Karl A Kirschenman | Debtor(s) | Case No. Chapter 7 | |
| | VER | RIFICATION OF CREDITOR N | MATRIX | |
| | | Number o | f Creditors: | 12 |
| | The above-named Debtor(s) I (our) knowledge. | nereby verifies that the list of cred | itors is true and co | rrect to the best of my |
| Date: | 3-17-17 | Karl A Kirschenman Signature of Debtor | | |

| | Docume | nt Page 16 of 59 | 9 | |
|--------------------------|-----------------------------|---|---|---|
| rmation to identify your | case: | | | |
| Karl A Kirschenn | nan | | | |
| First Name | Middle Name | Last Name | | |
| | | | | |
| First Name | Middle Name | Last Name | | |
| ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | |
| | | | | ☐ Check if this is amended filing |
| | Karl A Kirschenm First Name | Karl A Kirschenman First Name Middle Name First Name Middle Name | First Name Middle Name Last Name First Name Middle Name Last Name | First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets | | |
|-----|---|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 285,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 29,853.75 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 314,853.75 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 264,817.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 88,451.40 |
| | Your total liabilities | \$ | 353,268.40 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 6,608.99 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 6,570.28 |
| Pai | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 17 of 59 Case number (if known) Debtor 1 Karl A Kirschenman

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

9,036.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ca | se 17-08680 | Doc 1 | | 03/20/17 ument | Entered 03/20/1 | 7 15:10:05 | Desc | : Main |
|---|---|---|----------------------|---|------------------------------------|--|---|---|---|
| Fill i | n this inforn | nation to identify y | our case and th | | | F AUE 10 UL 33 | | | |
| Debt | tor 1 | Karl A Kirsch | enman | | | | | | |
| Dob | tor 2 | First Name | Middle | e Name | | Last Name | | | |
| | se, if filing) | First Name | Middle | e Name | | Last Name | | | |
| Jnite | ed States Bar | nkruptcy Court for th | ne: NORTHER | N DISTR | RICT OF ILLIN | IOIS | | | |
| Case | e number | | | | | | | | Check if this is an |
| | _ | | | | | - | | _ | amended filing |
| eachink | hedulo th category, so it fits best. Be | e as complete and ac e space is needed, at | scribe items. List a | le. If two n | narried people | n asset fits in more than one are filing together, both are e top of any additional pages, | equally responsible | e for supp | lying correct |
| Part | 1: Describe | Each Residence, Bui | lding, Land, or Ot | her Real I | Estate You Ow | n or Have an Interest In | | | |
| . Do | you own or h | ave any legal or equi | table interest in a | ny reside | nce, building, | land, or similar property? | | | |
| | No. Go to Part | 2. | | | | | | | |
| | Yes. Where is | s the property? | | | | | | | |
| 1.1 608 Prairie View Parkway Street address, if available, or other description | | ption | What i | is the property Single-family h Duplex or mult Condominium | i-unit building | the amount of any | secured c | s or exemptions. Put laims on <i>Schedule D:</i> Secured by Property. | |
| | | | | | Manufactured | or mobile home | Current value of | the | Current value of the |
| - | Hampshire | e IL | 60140-0000 | | Land | | entire property? | ı | portion you own? |
| | City | State | ZIP Code | | Investment pro Timeshare | pperty | \$285,000 | | \$285,000.00 |
| | | | | □ Who h | Other as an interest Debtor 1 only | in the property? Check one | (such as fee simple a life estate), if ki | ole, tenan nown. | r ownership interest cy by the entireties, or n-Filing Spouse |
| | Kane | | | | Debtor 2 only | | | | <u> </u> |
| | County | | | | Debtor 1 and D | · | ☐ Check if this | is comm | unity property |
| | | | | | | the debtors and another ou wish to add about this item on number: | (see instructions | 3) | |
| | | | | | | rom Part 1, including any | | | \$285,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Debtor 1 Karl A Kirschenman 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **GMC** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Yukon Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2003 Year: Debtor 2 only Current value of the Current value of the 240000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$3,500.00 \$3,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Infinity Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **EX35** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model 2011 Debtor 2 only Current value of the Current value of the 68000 Approximate mileage: entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$16,200.00 \$16,200.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$19,700.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Π Nο Yes. Describe..... Miscellaneous household goods and furnishings; contents of 4 \$6,000.00 bedroom house 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Karl A Kirschenman 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$1,500.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... \$7,500.00 for Part 3. Write that number here

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

□ Yes.....

Checking

17.1.

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Bank of America (5243)

□ No

Yes.....

Institution name:

1/2 Interest in Joint Account at Bank of **America (3576)** \$500.00 17.2. Checking

Bank of America (8659) \$62.00 Savings

\$157.11

| Del | otor 1 | Case 17-08680 | | Filed 03/20/17 Document | Entered 03/20/17 15:10:05 Page 21 of 59 Case number (if known) | Desc Main |
|----------------------|---------------------------------------|---|---|---|--|-------------------------------|
| | | 17.4. | Savings | 1/2 Intere America (| st in Savings Account at Bank of (9788) | \$258.00 |
| | | 17.5. | Brokerage | Acorns | | \$787.00 |
| | | 17.6. | Brokerage | E-Trade | | \$533.88 |
| | | 17.7. | Checking | Fifth Thire | d Bank | \$89.76 |
| ı | <i>Examp</i> ■ No | mutual funds, or public les: Bond funds, investme | | ith brokerage firms, mor | ney market accounts | |
| 19. | | blicly traded stock and | interests in in | corporated and uninco | orporated businesses, including an interes | t in an LLC, partnership, and |
| | | Give specific information Nar | about them me of entity: | | % of ownership: | |
| ■ [21. | Negotia Non-ne ■ No □ Yes. 0 | egotiable instruments are Give specific information a Issument or pension account | personal checks those you cann about them uer name: | s, cashiers' checks, pronot transfer to someone | nissory notes, and money orders. by signing or delivering them. s accounts, or other pension or profit-sharing | plans |
| | | List each account separat | | | | |
| | | Type | of account: | Institution n | ame: | |
| | | IRA | | E-Trade II | RA | \$266.00 |
| ı | Your sh Examp ■ No | | ts you have ma | rent, public utilities (elec | tinue service or use from a company ctric, gas, water), telecommunications compar name or individual: | nies, or others |
| I | Annuiti ■ No ⊐ Yes | | dic payment of | | life or for a number of years) | |
| 2 | | s in an education IRA, in C. §§ 530(b)(1), 529A(b), | | n a qualified ABLE pro | ogram, or under a qualified state tuition pro | ogram. |
| _ | ■ No □ Yes | Institution r | name and desc | ription. Separately file th | ne records of any interests.11 U.S.C. § 521(c) | |
| I | No | | | rty (other than anythin | g listed in line 1), and rights or powers exe | ercisable for your benefit |
| | □ Yes. | Give specific information | about them | | | |
| _ | | s, copyrights, trademark les: Internet domain name | | | | |

| Deb | tor 1 | Case 17-08680 Karl A Kirschenman | Doc 1 | Filed 03/20/17 Document | Entered 03/20/17 15:10:05 Page 22 of 59 Case number (if known) | Desc Main |
|--------------|----------------------------|--|---------------------------------|--|--|--|
| _ | _ | | hout thom | | | |
| | | Give specific information a | | | | |
| | Examp No | es, franchises, and other oles: Building permits, exclu | sive licenses | | n holdings, liquor licenses, professional licens | es |
| | | ' | bout trieffi | | | |
| Mon | ey or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Γax ref I _{No} | unds owed to you | | | | |
| | | Give specific information at | oout them, inc | cluding whether you alre | ady filed the returns and the tax years | |
| | Examp No | support bles: Past due or lump sum Give specific information | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| | Examp | amounts someone owes y bles: Unpaid wages, disabili benefits; unpaid loans | ty insurance | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | No Yes. | Give specific information | | | | |
| _ | | ts in insurance policies oles: Health, disability, or life | e insurance; I | nealth savings account (| HSA); credit, homeowner's, or renter's insurar | nce |
| | l Yes. | Name the insurance compa Com | any of each p pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| _ | If you a someo No | ne has died. | | | ed surance policy, or are currently entitled to rece | eive property because |
| | ı yes. | Give specific information | | | | |
| | Examp No | against third parties, who les: Accidents, employmen | ether or not at disputes, in | you have filed a lawsui surance claims, or rights | it or made a demand for payment s to sue | |
| 34. (| Other o | | ed claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims |
| _ | No Yes. | Describe each claim | | | | |
| | No | ancial assets you did not | already list | | | |
| L | J Yes. | Give specific information | | | | |
| 36. | | - | | - · · · · · · · · · · · · · · · · · · · | ny entries for pages you have attached | \$2,653.75 |
| Part | 5: Des | scribe Any Business-Related | Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| | • | own or have any legal or equi | itable interest | in any business-related p | roperty? | |
| _ | | to Part 6. | | | | |
| | Yes. G | So to line 38. | | | | |

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Case number (if known)

Document Debtor 1 Karl A Kirschenman

| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1. | y You Ow | n or Have an Interes | st In. | |
|------|---|------------|----------------------|---------------------------|------------------------|
| 46. | Do you own or have any legal or equitable interest in any f | arm- or | commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | | |
| | ☐ Yes. Go to line 47. | | | | |
| Part | 7: Describe All Property You Own or Have an Interest in The | at You Die | d Not List Above | | |
| ı | Do you have other property of any kind you did not already Examples: Season tickets, country club membership No Yes. Give specific information | / list? | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Wri | te that n | umber here | | \$0.00 |
| 55. | Part 1: Total real estate, line 2 | | | | \$285,000.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$19,700.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$7,500.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$2,653.75 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$29,853.75 | Copy personal property to | tal \$29,853.75 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | 2 | | | \$314,853.75 |

Official Form 106A/B Schedule A/B: Property page 6

| | | 170.11111. | 111 1000.7401.0 | 1 |
|---|-------------------------|-------------------|-----------------|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Karl A Kirschenn | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | |
| (ii Kilowii) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | Specific laws that allow exemption | | | |
|---|--------------------------------------|-----|---|-----------------------|--|--|
| | Copy the value from Schedule A/B | Che | | | | |
| 1/2 interest with non-filing spouse in 608 Prairie View Parkway Hampshire, | \$285,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 | | |
| IL 60140 Kane County Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 2003 GMC Yukon 240000 miles Line from Schedule A/B: 3.1 | \$3,500.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | | |
| Line Holli Schedule A/D. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| Miscellaneous household goods and furnishings; contents of 4 bedroom | \$6,000.00 | | \$3,022.89 | 735 ILCS 5/12-1001(b) | | |
| house Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| Wearing Apparel Line from Schedule A/B: 11.1 | \$1,500.00 | | \$1,500.00 | 735 ILCS 5/12-1001(a) | | |
| Line Holli Schedule A/D. | | | 100% of fair market value, up to any applicable statutory limit | | | |
| Checking: Bank of America (5243) Line from Schedule A/B: 17.1 | \$157.11 | | \$157.11 | 735 ILCS 5/12-1001(b) | | |
| LING HOLL SCHEUUIG AVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |

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Case number (if known)

| Denioi | Nail A Nii Scheillian | | | | |
|--------|---|--------------------------------------|--|---|------------------------------------|
| | ef description of the property and line on hedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | necking: 1/2 Interest in Joint | \$500.00 | 20.00 ■ \$500.00 □ 100% of fair market value, up to any applicable statutory limit | | 735 ILCS 5/12-1001(b) |
| | ne from Schedule A/B: 17.2 | | | | |
| | avings: Bank of America (8659) | \$62.00 ■ | | \$62.00 | 735 ILCS 5/12-1001(b) |
| LII | le IIOIII Schedule A/B. 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | vings: 1/2 Interest in Savings | \$258.00 | | \$258.00 | 735 ILCS 5/12-1001(b) |
| | ne from Schedule A/B: 17.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| | A: E-Trade IRA ne from Schedule A/B: 21.1 | \$266.00 | | \$266.00 | 735 ILCS 5/12-1006 |
| LII | le Hotti Schedule A/B. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every | | | ed on or after the date of adjustmer | nt.) |
| | No | | | | |
| | Yes. Did you acquire the property cover | ed by the exemption wi | thin 1 | 215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

| | | Document | <u>Page 26 (</u> | of 59 | | |
|---------------------------------|----------------------------|---|--------------------|-------------------------|--------------------------|---------------|
| Fill in this infor | mation to identify you | r case: | | | | |
| Debtor 1 | Karl A Kirschen | man | | | | |
| Dobto. 1 | First Name | | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF ILLIN | 10IS | | | |
| | | | | | | |
| Case number _ | | | | | ☐ Check | if this is an |
| () | | | | | | led filing |
| | | | | | | log illing |
| Official Forr | m 106D | | | | | |
| | | Who Have Claims S | ecured | hy Propert | V | 12/15 |
| Scriedaic | D. Orcartors | vino nave ciaims s | ccui cu | by 1 Topert | <u> </u> | 12/13 |
| | | f two married people are filing together out, number the entries, and attach it to | | | | |
| number (if known) | | out, number the entires, and attach it to | uns ioini. On t | the top of any addition | iai pages, write your na | ne and case |
| 1. Do any creditors | s have claims secured by | your property? | | | | |
| ☐ No. Chec | k this box and submit th | nis form to the court with your other so | chedules. You | have nothing else t | o report on this form. | |
| _ | n all of the information I | · | | J | · | |
| | | Delow. | | | | |
| Part 1: List A | All Secured Claims | | | Column A | Column B | Column C |
| | | nore than one secured claim, list the credit a particular claim, list the other creditors in | | Amount of claim | Value of collateral | Unsecured |
| | | cal order according to the creditor's name. | I Fall 2. As | Do not deduct the | that supports this | portion |
| Croot Lol | kaa Fadaral | | | value of collateral. | claim | If any |
| 2.1 Credit Ur | kes Federal | Describe the property that secures the | e claim: | \$23,197.00 | \$16,200.00 | \$6,997.00 |
| Creditor's Nan | | 2011 Infinity EX35 68000 miles | | . , | | |
| | | 2011 | | | | |
| | | As of the data you file the alaim is on | | | | |
| PO Box 1 | | As of the date you file, the claim is: Chapply. | eck all that | | | |
| Deerfield | l, IL 60015 | ☐ Contingent | | | | |
| Number, Stree | et, City, State & Zip Code | ☐ Unliquidated | | | | |
| VA // | -h(0 O) | Disputed | | | | |
| Who owes the d | ept? Check one. | Nature of lien. Check all that apply. | | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | | An agreement you made (such as mo car loan) | ortgage or secur | red | | |
| Debtor 1 and D | Ochtor 2 only | Statutory lien (such as tax lien, mech | anic's lion) | | | |
| _ | the debtors and another | ☐ Judgment lien from a lawsuit | ariic's lierr) | | | |
| ☐ Check if this o | | ☐ Other (including a right to offset) | | | | |
| community d | | Uther (including a right to onset) | | | | |
| _ | | | | | | |
| Date debt was inc | curred | Last 4 digits of account numbe | r <u>4650</u> | | | |
| | | | | | | _ |
| 2.2 Wells Far | rgo Mortgage | Describe the property that secures the | | \$241,620.00 | \$285,000.00 | \$0.00 |
| Creditor's Nam | ne | 1/2 interest with non-filing spo | ouse | | | |
| | | in 608 Prairie View Parkway Hampshire, IL 60140 Kane Co | ounty | | | |
| PO Box 1 | | As of the date you file, the claim is: Ch | | | | |
| Des Moir 50306-34 | | apply. | | | | |
| | | Contingent | | | | |
| Number, Stree | et, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | | |
| Who owes the d | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | An agreement you made (such as mo | ortgage or secur | red | | |
| Debtor 2 only | | car loan) | myaya or scour | | | |
| Debtor 1 and D | ebtor 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| | the debtors and another | ☐ Judgment lien from a lawsuit | - / | | | |
| ☐ Check if this o | | ☐ Other (including a right to offset) | | | | |
| community d | ebt | · - | | | | |
| Date debt was inc | nurrad | Last 4 digits of account numbo | r 5750 | | | |

Official Form 106D

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| Debtor 1 | Karl A Kirsch | nenman | | Case number (if know) | |
|----------|-----------------------------------|------------------------------|-----------------------------------|-----------------------|---|
| | First Name | Middle Name | Last Name | _ | |
| | | | | | |
| | | | | | |
| Add the | dollar value of yo | ur entries in Column A on t | his page. Write that number here: | \$264,817.0 | 0 |
| | the last page of yat number here: | our form, add the dollar val | lue totals from all pages. | \$264,817.0 | 0 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | Document | Page 2 | 3 of 59 | |
|---|--|---|---|--|---|
| Fill in th | is information to identify your | case: | | | |
| Debtor 1 | Karl A Kirschenn | nan | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, | | Middle Name | Last Name | | |
| | tates Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | | | |
| United 5 | tates bankruptcy Court for the. | NORTHERN DISTRICT OF IL | LINOIS | | |
| Case null (if known) | mber | | | | ☐ Check if this is an amended filing |
| Sched | | /ho Have Unsecured | | | 12/15 |
| any execu Schedule Schedule left. Attacl name and | tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec n the Continuation Page to this pages case number (if known). | s that could result in a claim. Also oired Leases (Official Form 106G). cured by Property. If more space is ge. If you have no information to re | list executory of Do not include needed, copy | ontracts on Schedule A/B: Prope any creditors with partially secur he Part you need, fill it out, numb | red claims that are listed in ber the entries in the boxes on the |
| Part 1: | List All of Your PRIORITY Ur | | | | |
| _ | ny creditors have priority unsecure | ed claims against you? | | | |
| _ | o. Go to Part 2. | | | | |
| □ Ye | | FV Haranana d Olahara | | | |
| Part 2: | List All of Your NONPRIORIT | | | | |
| _ | ny creditors have nonpriority unse | | | | |
| | | part. Submit this form to the court with | n your other sche | edules. | |
| ■ Ye | es. | | | | |
| unsec | cured claim, list the creditor separatel one creditor holds a particular claim, | laims in the alphabetical order of t ly for each claim. For each claim liste list the other creditors in Part 3.If you | d, identify what t | ype of claim it is. Do not list claims a | already included in Part 1. If more |
| | | | | | Total claim |
| | American Express | Last 4 digits of ac | count number | 1000 | \$8,402.82 |
| | Nonpriority Creditor's Name P.O. Box 981537 | When was the deb | t incurred? | July, 2015 - March, 2015 | |
| | El Paso, TX 79998 Number Street City State Zlp Code | As of the date you | file, the claim i | s: Check all that apply | |
| ١ | Who incurred the debt? Check one. | | | | |
| ı | Debtor 1 only | ☐ Contingent | | | |
| I | Debtor 2 only | ☐ Unliquidated | | | |
| Ī | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| I | \square At least one of the debtors and an | | RITY unsecured | I claim: | |
| | Check if this claim is for a com | | | | |
| | debt s the claim subject to offset? | Obligations arisi report as priority cla | | ration agreement or divorce that yo | u did not |
| | No | <u>-</u> ' ' ' | | g plans, and other similar debts | |
| | ■ No □ Yes | · | • | purchases and interest | |
| | 03 | Otner. Specify | Crount ouru | pa. Jiladoo alla lilloidat | |

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Document Page 29 of 59 Debtor 1 Karl A Kirschenman Case number (if know) 4.2 \$2,363.80 CareCredit Last 4 digits of account number 5176 Nonpriority Creditor's Name P.O. Box 960061 When was the debt incurred? October, 2016 - March, 2017 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.3 **Chase Bank** Last 4 digits of account number 5182 \$5,255.33 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? December, 2007 - March, 2017 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card purchases and interest 4.4 Citibank Last 4 digits of account number \$25,673.47 0367 Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? August, 1998 - March, 2017 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

■ No

☐ Yes

☐ Student loans

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 30 of 59 Debtor 1 Karl A Kirschenman Case number (if know) 4.5 \$18,340.98 Discover Last 4 digits of account number 8621 Nonpriority Creditor's Name P.O. Box 6103 When was the debt incurred? December, 1999 - March, 2017 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.6 **Discover Personal Loans** Last 4 digits of account number 5658 \$17,852.00 Nonpriority Creditor's Name P.O. Box 30954 When was the debt incurred? March, 2015 - March, 2017 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Personal Ioan** Other. Specify 4.7 State Farm Bank Last 4 digits of account number 6789 \$10,563.00 Nonpriority Creditor's Name P.O. Box 23025 When was the debt incurred? March, 2008 - March, 2017 Columbus, GA 31902 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Debts to pension or profit-sharing plans, and other similar debts

Document Page 31 of 59 Case number (if know) Debtor 1 Karl A Kirschenman 4.8 Wells Fargo Business Line Last 4 digits of account number Unknown Nonpriority Creditor's Name **Payment Remittance Center** When was the debt incurred? 2001 - 2006 P.O. Box 54349 Los Angeles, CA 90054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No **Previous business venture** ☐ Yes Other. Specify 4.9 Wells Fargo Visa Last 4 digits of account number Unknown Nonpriority Creditor's Name P.O. Box 29491 2001 - 2006 When was the debt incurred? Phoenix, AZ 85038 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Previous business venture** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 0.00 Total claims Taxes and certain other debts you owe the government from Part 1 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00

Total claims from Part 2

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

6f

6g.

6h.

6f

6h

6i.

Student loans

you did not report as priority claims

Total Claim

0.00

0.00

0.00

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Debtor 1 Karl A Kirschenman

88,451.40

Total Nonpriority. Add lines 6f through 6i.

88,451.40

| Fill in this information to identify your case: |
|---|
| |
| Debtor 1 Karl A Kirschenman |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | nt Page 34 of | <u> </u> |
|--|--|---|--|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Karl A Kirschenn | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| | orm 106H • H: Your Cod | ebtors | | 12/15 |
| people are filing ill it out, and no your name and | g together, both are equ umber the entries in the case number (if known) | ally responsible for supp | lying correct information the Additional Page to | complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write as a codebtor. |
| □ No | | | | |
| Yes | | | | |
| | | lived in a community pro Nevada, New Mexico, Pue | | ? (Community property states and territories include agton, and Wisconsin.) |
| ■ No. Go t □ Yes. Did | | use, or legal equivalent live | with you at the time? | |
| in line 2 ag | gain as a codebtor only i D), Schedule E/F (Official | f that person is a guarant | or or cosigner. Make su | f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill |
| | mn 1: Your codebtor Number, Street, City, State and Zl | P Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 Kare | en Kirshenman | | | ■ Schedule D, line □ Schedule E/F, line □ Schedule G Great Lakes Federal Credit Union |

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| Fil | ll in this information to identify you | r case: | | | | | |
|------|---|-------------------------------|-------------------------------------|-------------------|-------------------|--|--|
| De | ebtor 1 Karl A Kii | schenman | | | | | |
| 1 1 | ebtor 2 | | | | | | |
| Ur | nited States Bankruptcy Court for | the: NORTHERN DISTRI | CT OF ILLINOIS | | | | |
| 1 | ase number known) | | - | | mended pplemer | filing It showing postpetition chapter It so the following date: | |
| | Official Form 106I | | | MM | / DD/ YY | ΥΥ | |
| S | chedule I: Your In | come | | | | 12/15 | |
| atta | Duse. If you are separated and yach a separate sheet to this for art 1: Describe Employment information. | n. On the top of any addit | | nd case numb | ber (if k | | |
| | If you have more than one job, | | ■ Employed | _ | I Employ | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | ☐ Not employed | | |
| | employers. | Occupation | Outside Sales Represent | ative | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Jasper Engines and Transmissions | C | cvs | | |
| | Occupation may include stude or homemaker, if it applies. | nt Employer's address | | = | CVS D loonso | rive cket, RI 02895 | |
| | | How long employed t | there? 3 months | | | | |
| Pa | Give Details About | Monthly Income | | | | | |
| | timate monthly income as of the ouse unless you are separated. | e date you file this form. If | you have nothing to report for an | / line, write \$0 |) in the s | space. Include your non-filing | |
| | ou or your non-filing spouse have re space, attach a separate sheet | | ombine the information for all emp | oloyers for tha | t person | on the lines below. If you need | |
| | | | | For Debtor | r 1 | For Debtor 2 or non-filing spouse | |

List monthly gross wages, salary, and commissions (before all payroll 6,249.56 3,271.67 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,271.67 6,249.56

Official Form 106I Schedule I: Your Income page 1

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| Debt | tor 1 | Karl A Kirschenman | - | С | ase r | number (if known) | | | | |
|------|------------|--|-----------|------|----------|-------------------|----------|----------------------|----------------|----------|
| | Com | ny line 4 hore | 4 | | For | Debtor 1 | non | Debtor n-filing s | pouse | |
| | Cop | by line 4 here | 4. | | Φ | 3,271.67 | \$ | ь, | 249.56 | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 656.85 | \$ | 1, | 184.15 | _ |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | 0.00 | \$ | | 0.00 | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$_ | | 312.48 | - |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ \$ | 0.00 | \$_ | | 0.00 | - |
| | 5e. 5f. | Insurance Domestic support obligations | 5e 5f. | | ֆ \$ | 147.59 | - \$ | | 448.67 0.00 | - |
| | 5g. | Union dues | 5g | | \$ — | 0.00 | \$ - | | 0.00 | - |
| | 5h. | Other deductions. Specify: Health Savings Account | 5h | | \$ | | + \$- | | 162.50 | - |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | ; | ъ В | 804.44 | \$ | | 107.80 | = |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | · — B | 2,467.23 | \$ | | 141.76 | - |
| 8. | | all other income regularly received: | • • | | _ | 2,407.20 | – | , | 141.70 | - |
| 0. | 8a. | Net income from rental property and from operating a business, | | | | | | | | |
| | | profession, or farm | | | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a | ١. | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b | ٠. | \$ | 0.00 | \$_ | | 0.00 | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | | | | | | | - |
| | | regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | :_ | \$ | 0.00 | \$ | | 0.00 | |
| | 8d. | Unemployment compensation | 8d | | <u> </u> | 0.00 | \$- | | 0.00 | - |
| | 8e. | Social Security | 8e | | \$ — | 0.00 | \$ | | 0.00 | - |
| | 8f. | Other government assistance that you regularly receive | | | _ | | _ | - | - | = |
| | | Include cash assistance and the value (if known) of any non-cash assistance | | | | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | | |
| | | Specify: | 8f. | | \$ | 0.00 | \$ | | 0.00 | |
| | 8g. | Pension or retirement income | _ 8g | ١. | \$ | 0.00 | \$ | | 0.00 | - |
| | 8h. | Other monthly income. Specify: | 8h | .+ | \$ | 0.00 | + \$_ | | 0.00 | - |
| _ | | | | Г | | | | | | 7 |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$_ | | 0.00 | 0 |
| 40 | 0-1 | aulata manthir income. A III Fra 7 a Fra 0 | 40 | Φ. | | 407.00 | | 444 70 | | |
| 10. | | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | 4 | 2,467.23 + \$_ | 4, | 141.76 | = \$ _ | 6,608.99 |
| | | | _ L | | | | | | | |
| 11. | | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your | | ndo | ntc | vour roommator | n and | | | |
| | | er friends or relatives. | uepe | riuc | iiio, | your roommates | s, and | | | |
| | | not include any amounts already included in lines 2-10 or amounts that are not | availa | able | to pa | ay expenses list | ed in S | | | |
| | Spe | cify: | | | | | | 11. | +\$ | 0.00 |
| 12 | Δdc | I the amount in the last column of line 10 to the amount in line 11. The res | ult ic | the | com | hined monthly in | ncome | | | |
| 12. | | te that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | | | |
| | арр | lies | | | | | | 12. | \$ | 6,608.99 |
| | | | | | | | | l | Combin | ned |
| 40 | . | | ^ | | | | | | monthl | y income |
| 13. | | you expect an increase or decrease within the year after you file this form | ′ | | | | | | | |
| | | No. | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Filli | in this information to identify your case: | | | | |
|-------------|--|--|-----------------|---|-------------------------------|
| Debt | otor 1 Karl A Kirschenman | | Che | ck if this is: | |
| | otor 2 ouse, if filing) | | | An amended filing A supplement show 13 expenses as of | wing postpetition chapter |
| ` ' | , 0, | NC. | - | · | |
| Unite | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINC | <u> </u> | | MM / DD / YYYY | |
| | se numbefsnown) | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | filion to noth on lo | -th | - | 12/1 |
| info | as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo mber (if known). Answer every question. | | | | |
| Part | Tt 1: Describe Your Household Is this a joint case? | | | | |
| 1. | ■ No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? ☐ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses in | for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Yes. Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes □ No |
| | | | | | ☐ No |
| | | - | | | □ No |
| | | | | _ | ☐ Yes |
| | | | | | □ No |
| 3. | Do your expenses include ■ No. | | | _ | ☐ Yes |
| 0. | expenses of people other than yourself and your dependents? | | | | |
| Esti exp | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a suppliplicable date. | | | | |
| the | clude expenses paid for with non-cash government assistance if a value of such assistance and have included it on Schedule I: You ficial Form 106I.) | | | Your exp | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | clude first mortgage | e 4. \$ | 3 | 2,148.28 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | ; | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| 5. | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as homeometrical payments. | ne equity loons | 4d. \$ 5. \$ | | 0.00 0.00 |
| J. | Additional mortgage payments for your residence, Such as non | ie euuliv 10al 15 | J. J | , | v.uu |

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| Debto | or 1 | Karl A Kirschenman | Case nur | mbe | er (if known) | |
|-------------|----------------------|---|---------------------------|------------|---------------|--------------------------|
| 5. l | Jtiliti | ies: | | | | |
| 6 | Sa. | Electricity, heat, natural gas | 6a | . ; | \$ | 250.00 |
| 6 | Sb. | Water, sewer, garbage collection | 6b | . ; | \$ | 80.00 |
| 6 | Sc. | Telephone, cell phone, Internet, satellite, and cable service | ces 6c | . : | \$ | 330.00 |
| 6 | Sd. | Other. Specify: | 6d | . ; | \$ | 0.00 |
| 7. F | Food | and housekeeping supplies | | | \$ | 800.00 |
| | | dcare and children's education costs | 8 | | \$ | 0.00 |
| | | ning, laundry, and dry cleaning | 9 | | \$ | 100.00 |
| | | onal care products and services | 10 | | \$ | 100.00 |
| | | ical and dental expenses | 11 | | \$ | |
| | | • | 11 | ٠, | Φ | 200.00 |
| | | sportation. Include gas, maintenance, bus or train fare. ot include car payments. | 12 | . : | \$ | 400.00 |
| | | rtainment, clubs, recreation, newspapers, magazines, a | | | \$ | 0.00 |
| | | itable contributions and religious donations | 14 | | \$ | 0.00 |
| | | <u> </u> | 14 | . , | Φ | 0.00 |
| | | rance. ot include insurance deducted from your pay or included in | lines 4 or 20 | | | |
| | | Life insurance | 15a | | \$ | 0.00 |
| | | Health insurance | 15b | | · | 0.00 |
| | | | | | φ \$ | |
| | | Vehicle insurance | 15c | | * | 170.00 |
| | | Other insurance. Specify: | 15d | . ; | \$ | 0.00 |
| | F axe Spec | s. Do not include taxes deducted from your pay or included siture | d in lines 4 or 20. 16 | | \$ | 0.00 |
| | • | Illment or lease payments: | 10 | . , | Ψ | 0.00 |
| | | Car payments for Vehicle 1 | 17a | | \$ | 522.00 |
| | | Car payments for Vehicle 2 | 17b | | \$ | |
| | | | | | φ \$ | 0.00 |
| | | Other. Specify: | | | · ——— | 0.00 |
| | | Other. Specify: | 17d | . ; | \$ | 0.00 |
| | | payments of alimony, maintenance, and support that y | | | \$ | 0.00 |
| | | icted from your pay on line 5, Schedule I, Your Income | (Omolai i omi rool). | | \$ | |
| | | r payments you make to support others who do not liv | - | | Φ | 0.00 |
| | Spec | · | 19 | | | |
| | | r real property expenses not included in lines 4 or 5 of | | | | 0.00 |
| | | Mortgages on other property | 20a | | | 0.00 |
| | | Real estate taxes | 20b | | \$ | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c | | | 0.00 |
| 2 | 20d. | Maintenance, repair, and upkeep expenses | 20d | . ; | \$ | 0.00 |
| | | Homeowner's association or condominium dues | 20e | . ; | \$ | 0.00 |
| 1. (| Othe | r: Specify: Spouse Debt Payment | 21. | | +\$ | 1,370.00 |
| | | icle Maintenance (2003 Yukon) | | | +\$ | 100.00 |
| 2 1 | Calcı | ulate your monthly expenses | | | | |
| | | Add lines 4 through 21. | | | \$ | 6,570.28 |
| | | | Official Form 106 L 2 | | \$ | 0,370.20 |
| | | Copy line 22 (monthly expenses for Debtor 2), if any, from | | | · | |
| 2 | 22c. <i>i</i> | Add line 22a and 22b. The result is your monthly expenses | 3. | | \$ | 6,570.28 |
| 3. (| Calc | ulate your monthly net income. | | _ | | |
| | | Copy line 12 (your combined monthly income) from Scheo | dule I. 23a | . ; | \$ | 6,608.99 |
| | | Copy your monthly expenses from line 22c above. | 23b | | | 6,570.28 |
| _ | | 1,7,7 7 - 1 | _52 | _ | <u> </u> | 3,010120 |
| 2 | 23c. | Subtract your monthly expenses from your monthly incom | ne. | | _ | |
| | - | The result is your monthly net income. | 23c | . <u>[</u> | \$ | 38.71 |
| | | • | | | | |
| F | or ex | ou expect an increase or decrease in your expenses with xample, do you expect to finish paying for your car loan within the yell ication to the terms of your mortgage? | | | | or decrease because of a |
| | ■ No | , 55 | | | | |
| | | | | | | |
| [| □Y€ | es. Explain here: | | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------------------|----------------------------|--------------------------|---------------------|--------------------------------|---|
| Debtor 1 | Karl A Kirschenn | nan | | | |
| | First Name | Middle Name | Last Name | • | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | <u> </u> | |
| (Opodoo II, IIIIIIg) | riiotranio | | | • | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| | | | | | |
| Official For | <u>m 106Dec</u> | | | | |
| Declara | tion About a | n Individua | al Debtor's | s Schedules | 12/15 |
| | | | | | .2,10 |
| If two married p | eople are filing togethe | r, both are equally resp | onsible for supply | ying correct information. | |
| | !- f (| | | badalaa Maldaa afalaa af | |
| | | | | | atement, concealing property, or ,000, or imprisonment for up to 20 |
| | 18 U.S.C. §§ 152, 1341, 1 | | and aproy sace sail | . 100dit III IIII00 up to 4200 | ,000, 0р.100 |
| | | | | | |
| | | | | | |
| Sig | gn Below | | | | |
| | | | | | |
| Did you p | ay or agree to pay some | one who is NOT an att | orney to help you | fill out bankruptcy forms? | |
| _ N- | | | | | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | ankruptcy Petition Preparer's Notice, |
| | | | | Declarati | ion, and Signature (Official Form 119) |
| | | | | | |
| Under pen | alty of perjury, I declare | that I have read the su | ımmary and sched | ules filed with this declara | ation and |
| that they a | re true and correct. | | - | | |
| X /s/ Ka | rl A Kirschenman | | х | | |
| | Kirschenman | | | nature of Debtor 2 | |
| | ure of Debtor 1 | | 9- | | |

Date

Date March 20, 2017

| | in this inform | nation to identify you | r 00001 | | | |
|-------------------|---------------------|--|--|---|---|---|
| | | nation to identify you | | | | |
| De | btor 1 | Karl A Kirschen | man Middle Name | Last Name | | |
| | btor 2 | First Name | Middle None | Loot Name | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| | se number | | | | | theck if this is an mended filing |
| Sta Be a | as complete a | of Financial | attach a separate sheet to | re filing together, both are | ankruptcy equally responsible for sup | |
| | <u> </u> | , | arital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | ıs? | | | |
| | ■ Married □ Not mar | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | at all of the places you I | ived in the last 3 years. Do no | ot include where you live now | <i>'</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$11,600.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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Case number (if known) Debtor 1 Karl A Kirschenman

| | | | | | | D. 1. | |
|----------|------------------------------|----------------------------|------------------------------|--|---|--|---|
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | or last caler anuary 1 to | idar year: December 3 | 31, 2016) | ■ Wages, commissions, bonuses, tips | \$3,000.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | | ☐ Wages, commissions, bonuses, tips | \$29,466.94 | ☐ Wages, commissions, bonuses, tips | |
| | | | | Operating a business | | ☐ Operating a business | |
| | | dar year bef December 3 | | ■ Wages, commissions, bonuses, tips | \$66,334.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | □ No | source and th | · · | ome from each source separa | tely. Do not include income th | nat you listed in line 4. | |
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | or last caler anuary 1 to | idar year: December 3 | 31, 2016) | Inheritance | \$26,000.00 | | |
| | | dar year bef December 3 | | Unemployment | \$1,307.00 | | |
| Pa 6. | | r Debtor 1's | or Debtor 2 | Made Before You Filed for | r debts? | | |
| | □ No. | | | Debtor 2 has primarily consular personal, family, or household | | are defined in 11 U.S.C. § 10 | 1(8) as "incurred by an |
| | | During the | 90 days befo Go to line 7 | ore you filed for bankruptcy, di 7. | d you pay any creditor a total | of \$6,425* or more? | |
| | | ☐ Yes | paid that cr | | nts for domestic support obliga | n one or more payments and the ations, such as child support a | |
| | | * Subject t | | | | or after the date of adjustment | - |
| | Yes. | | | or both have primarily consu ore you filed for bankruptcy, di | | of \$600 or more? | |
| | | ■ No. | Go to line 7 | 7. | | | |
| | | ☐ Yes | List below of include pay | each creditor to whom you pai | | the total amount you paid that fort and alimony. Also, do not i | |

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Case number (if known) Document Debtor 1 Karl A Kirschenman

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | yment for | | |
|-----|--|---|---|---|---------------------------------|---|--|--|
| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony. | rtners; relatives of any ger control, or owner of 20% of | neral partners; partn or more of their votin | erships of which yough securities; and an | u are a genera ny managing a | I partner; corporations gent, including one for | | |
| | NoYes. List all payments to an insider. | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No | | yments or transfer | any property on a | ccount of a de | ebt that benefited an | | |
| | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment | | |
| | | | paid | still owe | Include cred | | | |
| Par | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. | | | | | | | |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | | | |
| | Creditor Name and Address | Describe the Property Explain what happene | ed | Date | | Value of the property | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca | | cluding a bank or fi | nancial institution | ı, set off any a | mounts from your | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taker | action was | Amount | | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an | | erty in the possess | sion of an assigne | e for the bene | fit of creditors, a | | |
| | ■ No □ Yes | | | | | | | |

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Case number (if known) Document Debtor 1 Karl A Kirschenman

| Pai | t 5: List Certain Gifts and Contributions | s | | | | | |
|-----|--|----------|--|-----------------------------------|---------------------------|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | |
| | Gifts with a total value of more than \$60 per person | 0 | Describe the gifts | Dates you gave the gifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| 14. | No | | lid you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? | | |
| | Yes. Fill in the details for each gift or co | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name | | Describe what you contributed | Dates you contributed | Value | | |
| | Address (Number, Street, City, State and ZIP Code | e) | | | | | |
| Pai | t 6: List Certain Losses | | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | ptcy or | since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster, | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and | | | | | | |
| | how the loss occurred | | the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property. | loss | lost | | |
| | Roof damaged due to hail | Insura | ance paid for replacement | | Unknown | | |
| Pai | t 7: List Certain Payments or Transfers | 3 | | | | | |
| 16. | consulted about seeking bankruptcy or p | reparir | d you or anyone else acting on your behalf pay on gate bankruptcy petition? s, or credit counseling agencies for services required | | rty to anyone you | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | |
| | Springer Brown, LLC 300 South County Farm Road Suite I | | \$1,835 retainer | 3/15/17 | \$1,835.00 | | |
| 17. | Wheaton, IL 60187 Within 1 year before you filed for bankrui | otcv. di | d you or anyone else acting on your behalf pay o | or transfer any prope | rty to anyone who | | |
| | promised to help you deal with your cred Do not include any payment or transfer that | litors o | r to make payments to your creditors? | , | | | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | |

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Debtor 1 Karl A Kirschenman

| 18. | Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details. | isiness or financial aff de as security (such as | airs? the granting of a | | |
|-----|--|--|----------------------------|---|---|
| | Person Who Received Transfer Address Person's relationship to you | Description and property transfer | | Describe any property of payments received or de paid in exchange | |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-profined No Yes. Fill in the details. | | ny property to a s | self-settled trust or similar o | levice of which you are a |
| | Name of trust | Description and | value of the prop | erty transferred | Date Transfer was made |
| Pai | t 8: List of Certain Financial Accounts, Ins | truments, Safe Depos | it Boxes, and Sto | orage Units | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc | r other financial accou | ınts; certificates | of deposit; shares in banks | |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accou | nt or Date account wa closed, sold, moved, or transferred | s Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 yearsh, or other valuables? | ear before you filed fo | r bankruptcy, an | y safe deposit box or other | depository for securities, |
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe the contents | Do you still have it? |
| | Bank of America | Debtor | | Mortgage and car loan documents | □ No ■ Yes |
| 22. | Have you stored property in a storage unit o | r place other than you | r home within 1 | year before you filed for bar | ıkruptcy? |
| | ■ No | | | | |
| | ☐ Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe the contents | Do you still have it? |
| Par | t 9: Identify Property You Hold or Control f | , | | | |
| | Do you hold or control any property that son for someone. | | lude any propert | y you borrowed from, are st | oring for, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe the property | Value |
| | | | | | |

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Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | |
|-----|---|--|--|--------------------|--|--|--|--|
| Rep | ort all notices, releases, and proceedings tha | t you know about, regardless of when | they occurred. | | | | | |
| 24. | Has any governmental unit notified you that | you may be liable or potentially liable | under or in violation of an environme | ental law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of a | any release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or adm | inistrative proceeding under any envir | onmental law? Include settlements a | and orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Par | rt 11: Give Details About Your Business or C | Connections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankrupto | cy, did you own a business or have any | y of the following connections to any | / business? | | | | |
| | ■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |
| | ☐ No. None of the above applies. Go to Page 1 | art 12. | | | | | | |
| | Yes. Check all that apply above and fill | in the details below for each business. | | | | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business | Employer Identification number Do not include Social Security | | | | | |
| | (Number, Street, Oity, State and 211 Sode) | Name of accountant or bookkeeper | Dates business existed | | | | | |
| | K2 Consulting | Marketing, Graphic Design, Capital Equipment Sales | EIN: From-To 7/2015-Present | | | | | |

Page 46 of 59 Document Debtor 1 Case number (if known) Karl A Kirschenman 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Karl A Kirschenman Signature of Debtor 2 Karl A Kirschenman Signature of Debtor 1 Date March 20, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| | | DUCI | ument Page 47 of 59 | |
|---|---|---|--|--|
| Fill in this infor | mation to identify your cas | se: | | |
| Debtor 1 | Karl A Kirschenman | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: N | IORTHERN DIST | FRICT OF ILLINOIS | |
| | | | | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| If you are an indi creditors have you have lease You must file thi whiche on the If two married pe sign are Be as complete a write you | ividual filing under chapte e claims secured by your sed personal property and s form with the court with ever is earlier, unless the ofform eople are filing together in ad date the form. | r 7, you must fill property, or the lease has no in 30 days after court extends the a joint case, both If more space is er (if known). | | eet for the meeting of creditors, ne creditors and lessors you list information. Both debtors must |
| • | • | 1 of Schedule D | : Creditors Who Have Claims Secured by Proper | ty (Official Form 106D), fill in the |
| information be Identify the cre | elow. editor and the property that | is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| name: | Great Lakes Federal Cre 2011 Infinity EX35 68 | | ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | □ No ■ Yes |
| name: | Vells Fargo Mortgage | | ☐ Surrender the property. ☐ Retain the property and redeem it. ■ Retain the property and enter into a | □ No ■ Yes |
| Description of | 1/2 interest with non- spouse in 608 Prairie | | Reaffirmation Agreement. | |

Part 2: List Your Unexpired Personal Property Leases

Parkway Hampshire, IL 60140

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Kane County

Will the lease be assumed?

Official Form 108

property

securing debt:

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| Debtor 1 Karl A Kirschenman | Case number (if known) |
|--|---|
| | |
| Lessor's name: | □ No |
| Description of leased Property: | П у |
| Troporty. | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Tropolly. | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | <u>_</u> |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| | |
| Under penalty of perjury, I declare that I have indicated my inten- property that is subject to an unexpired lease. | tion about any property of my estate that secures a debt and any personal |
| X /s/ Karl A Kirschenman | X |
| Karl A Kirschenman | Signature of Debtor 2 |
| Signature of Debtor 1 | |
| Date March 20, 2017 | Date |
| Date March 20, 2017 | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-08680 Doc 1 Filed 03/20/17 Entered 03/20/17 15:10:05 Desc Main Document Page 53 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| Karl A Kirschenman | | Case No. | | |
|--|--|---|---|--|
| | Debtor(s) | Chapter | 7 | |
| DISCLOSURE OF COMPENSA | TION OF ATTO | RNEY FOR DE | EBTOR(S) | |
| ompensation paid to me within one year before the filing of t | he petition in bankruptcy | , or agreed to be paid | to me, for services rend | lered or to |
| For legal services, I have agreed to accept | | \$ | 1,500.00 | |
| | | | 1,500.00 | |
| Balance Due | | \$ | 0.00 | |
| 335.00 of the filing fee has been paid. | | | | |
| he source of the compensation paid to me was: | | | | |
| ■ Debtor □ Other (specify): | | | | |
| he source of compensation to be paid to me is: | | | | |
| ■ Debtor □ Other (specify): | | | | |
| I have not agreed to share the above-disclosed compensati | ion with any other persor | n unless they are members | pers and associates of n | ny law firm. |
| | | | | firm. A |
| n return for the above-disclosed fee, I have agreed to render l | legal service for all aspec | ets of the bankruptcy c | ase, including: | |
| Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and | t of affairs and plan whic | h may be required; | | ptcy; |
| y agreement with the debtor(s), the above-disclosed fee does | not include the followin | g service: | | |
| CE | ERTIFICATION | | | |
| | eement or arrangement fo | or payment to me for re | epresentation of the deb | otor(s) in |
| rch 20, 2017 | /s/ Joshua D. Gr | eene | | |
| | | | | |
| | | | | |
| | | arm Road | | |
| | | 87 | | |
| | | | | |
| | <u>www.springerbr</u> Name of law firm | own.com | | _ |
| | DISCLOSURE OF COMPENSA Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in For legal services, I have agreed to accept. Prior to the filing of this statement I have received. Balance Due. 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of the return for the above-disclosed fee, I have agreed to render and filing of any petition, schedules, statement. Representation of the debtor at the meeting of creditors and cother provisions as needed] By agreement with the debtor(s), the above-disclosed fee does | Disclosure of Compensation of the above-disclosed compensation with any other person copy of the agreement, together with a list of the names of the people sharing in the neturn for the above-disclosed fee does not include the following agreement with the debtor(s), the above-disclosed fee does not include the following arch 20, 2017 The source of the debtor(s), the above-disclosed fee does not include the following arch 20, 2017 The source of the debtor(s), the above-disclosed fee does not include the following arch 20, 2017 The source of complement for the matter of Altom Springer Brown, 300 S. County F. Suite I Wheaton, IL. 6d1 Source 210 One F. Source of complement for www.springer Brown, 300 S. County F. Suite I Wheaton, IL. 6d1 Source 210 One F. Source of complement for www.springer brown, 300 S. County F. 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Suite I Wheaton, IL. 6d1 Source 210 One F. Www.springer brown, 300 S. County F. Suite I Wheaton, IL. 6d1 Source 210 One F. Www.springer brown, 300 S. County F. Suite I Wheaton, IL. 6d1 Source 210 One F. Www.springer brown and 210 | Debtor(s) Chapter DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DE Tursuant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above nam ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as fol For legal services, I have agreed to accept \$ Prior to the filing of this statement I have received \$ Balance Due \$ 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): Thave agreed to share the above-disclosed compensation with any other person unless they are members copy of the agreement, together with a list of the names of the people sharing in the compensation is attain return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the agreement, together with a list of the names of the people sharing in the compensation is attain return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the agreement of any petition, schedules, statement of affairs and plan which may be required; Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hear [Other provisions as needed] The proparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hear [Other provisions as needed] The proparation of the debtor of the meeting of creditors and confirmation hearing, and any adjourned hear [Other provisions as needed] The proparation of the debtor of the person of the person of the person of the person of the p | Disclosure of Compensation of the filing fee has been paid. The source of compensation to be paid to me was: The better of the compensation to be paid to me was: The better of the compensation to be paid to me was: The better of the debtor's (incontension of the better) of the debtor of the debtor (s) incontension of the debtor (s) in contension of the debtor (s) in contension of the petition in bankruptcy, or agreed to be paid to me, for services rene rendered on behalf of the debtor(s) in contension of rin connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,500.00 Balance Due \$ 1,500.00 Balance Due \$ 1,500.00 Balance Due \$ 0.00 Balance Due Bala |

Advance Payment Retainer Agreement

I, Mai Kilsch enman the undersigned, hereinafter referred to as "Client", agree to employ Springer Brown, LLC., hereinafter referred to as "Attorney", to render legal services in connection with filing a Chapter7 bankruptcy for me, and hereby empower and authorize Attorney to do all things, in their sole discretion, reasonably necessary to bring the matter to a successful conclusion. Client acknowledges that the following advance payment retainer agreement has been fully explained, and Client agrees to pay said fees and costs in consideration of legal services rendered or to be rendered.

Client agrees to pay Attorney a fee of \$ 1,500.00 for services set forth below. In addition, Client agrees to pay all costs, including the filing fee for the bankruptcy \$335.00.

This retainer agreement is an advance payment retainer agreement. The funds Client has agreed to pay Attorney shall be deposited in the Springer Brown, LLC General Operating Account and ownership of said hands shall pass to Springer Brown, LLC immediately upon payment.

As our client, it is your option to have your money placed into a security retainer. The choice of the type of retainer to be used is yours alone.

The special purpose for this advance payment retainer is to allow Client to retain Attorney to represent him against creditors. Client understands that it is advantageous to treat his retainer as an advance payment retainer in that it protects the funds paid to Attorney from the claims of his creditors. It this retainer were treated as a security retainer, said funds would remain the property of Client and therefore subject to the claims of the Client's creditors.

It is understood that the above referenced flat fee is payment for services rendered and services to be performed. The services include: review of financial status; review of various documents related to debts and obligations; counseling as to various types of bankruptcy chapters; effect of bankruptcy on future ability to obtain new credit; effect of reaffirmation, redemption, avoiding, liens and surrendering property; specific advice regarding how to avoid bankruptcy and alternatives to bankruptcy; complete drafting of all required bankruptcy documents; revision and redraft of final bankruptcy documents; attending creditors' meeting, and closing file.

Client agrees that additional attorney's fees will be due should additional representation become necessary, including, but not limited to any 2004l examination, any adversary proceedings, objections to discharge, or any other action, hearing or representation that is not specified in the preceding paragraph of this agreement. Said additional representation shall be covered by a separate legal services agreement and will require an additional retainer.

The Client agrees that should he decide not to file bankruptcy or decide not to continue using Attorney's services, Attorney may charge against any retainer paid the amount of \$350.00 per hour for all services rendered to date, plus actual costs incurred.

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Client agrees to cooperate in the preparation of the bankruptcy case, to appear for the creditors' meeting, depositions and court appearances and to comply with all reasonable requests made in preparation of this bankruptcy case. Failure to cooperate may result in Court-imposed sanctions and Attorney's withdrawal from the case.

Client understands that he shall receive copies of all documents related to his file. Client should retain those documents as his copy of his file. Should Client require additional copies of the Attorney's file the Client understands that he will be charged for those copies.

Client understands that his file shall be kept no more than five years. Should Client require copies of any documents or the return of original documents provided to Attorney he must request those copies in writing before the expiration of that five-year period.

It is agreed that upon the event of any default or breach of any kind under this agreement by Client, Attorney reserves the right to withdraw as counsel of record for Client. It is further agreed that Client shall not have any recourse or claim against Attorney for damages following the withdrawal of Attorney as Client's counsel.

In some cases it may be necessary to hire an attorney outside Attorney's firm. This attorney will be paid out of the retainer paid to Attorney. Client expressly consents to the hiring of an outside attorney to cover court dates as needed.

Client understands that it is the Client's responsibility to provide Attorney with a complete and accurate list of creditors and other information requested on Attorney's Debt Listing Sheet and Questionnaire. The Client further understands that any debts not listed in his bankruptcy schedules may not be discharged. If Client fails to provide Attorney with all information necessary to prepare the necessary documents and said failure necessitates the amending of the schedules or Statement of Financial Affairs, Client agrees to pay an additional \$100.00 to cover the fees and costs of said amendment.

The fees charged in connection with this bankruptcy and for bankruptcy issues only. They do not included resolution of any matters involving credit information.

This constitutes the entire agreement between the Attorney and Clients regarding attorneys' fees and/or services provided in the engagement, the parties agree to resolve that dispute through mediation, followed by arbitration before any suit is filed.

Attorney is a debt relief agency and helps people file for relief under the Bankruptcy Code.

Special Financial Management Course Notice

Client MUST provide Attorney with a copy of Client's Certificate of Completion of Financial Management Course. If Client fails to ensure that Attorney has received and filed the required Certificate of Completion of Financial Management Course, the Client shall be responsible for payment of the case reopening fee and additional Attorney's fees of \$600.00 for filing a motion to reopen the case and file said certificate. Attorney is under no obligation to file any motion to reopen Client's case until the above referenced fees and costs are paid.

Client Client

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By Client's signature below, Client acknowledges understanding the terms of this agreement and agrees to abide by its provisions. Client has received a copy of this agreement for his records no later than five business days after the first date on which the Attorney provided any bankruptcy assistance services to client.

Dated: 3-17-17

Client

Client

Attorney

United States Bankruptcy Court Northern District of Illinois

| In re | Karl A Kirschenman | | Case No. | |
|-------|--|---|-----------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VER | RIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of O | Creditors: | 12 |
| | The above-named Debtor(s) h (our) knowledge. | hereby verifies that the list of credito | ors is true and | correct to the best of my |
| Date: | March 20, 2017 | /s/ Karl A Kirschenman Karl A Kirschenman Signature of Debtor | | |

American Express P.O. Box 981537 El Paso, TX 79998

CareCredit P.O. Box 960061 Orlando, FL 32896

Chase Bank P.O. Box 15298 Wilmington, DE 19850

Citibank P.O. Box 6500 Sioux Falls, SD 57117

Discover P.O. Box 6103 Carol Stream, IL 60197

Discover Personal Loans P.O. Box 30954 Salt Lake City, UT 84130

Great Lakes Federal Credit Union PO Box 1289 Deerfield, IL 60015

Karen Kirshenman

State Farm Bank P.O. Box 23025 Columbus, GA 31902

Wells Fargo Business Line Payment Remittance Center P.O. Box 54349 Los Angeles, CA 90054

Wells Fargo Mortgage PO Box 14538 Des Moines, IA 50306-3411 Wells Fargo Visa P.O. Box 29491 Phoenix, AZ 85038